

ASPULL

Law

URBAN DISTRICT COUNCIL.

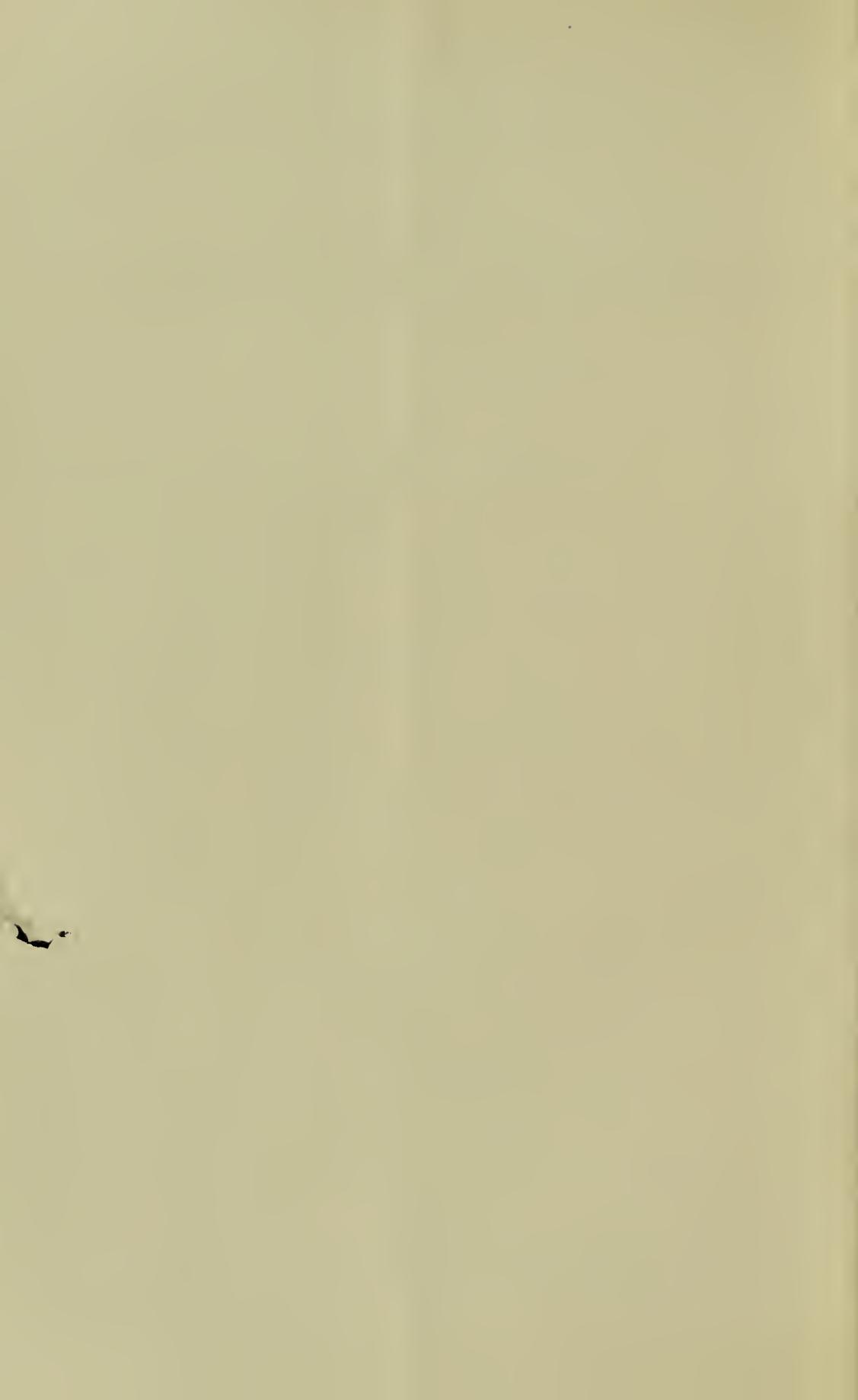


ANNUAL REPORT

OF THE

Medical Officer of Health

For the Year 1910.



ASPULI,

NR. WIGAN,

February 10th, 1911.

To the Chairman and Members of the Aspull Urban District Council.

GENTLEMEN,

I beg to submit to you my Annual Report on the Health of the District during the year ending December 31st, 1910, together with various lists and Tables required by the Local Government Board and the County Council.

PART I.—GENERAL SANITARY CONDITION
DURING 1910.

The Urban District of Aspull comprises 1905 statute acres, lying to the North-east of the County Borough of Wigan. The ground has a general trend upwards in a North-easterly direction, the highest point reached being about 500 feet above sea-level. The sub-soil is clay, overlying the coal-measures of the Wigan Coal-field.

The population, which was 8380 at the last Census, is mainly of the working class, the chief occupations being Coal Mining, Cotton Spinning and Weaving, and Steel-working, with a small proportion of the inhabitants engaged in Agriculture. The distribution of the population varies considerably, being densest where the District abuts on the Wigan boundary, and becoming more sparse as the radius from this point increases.

The Housing Accommodation for the working classes is in the main satisfactory. Your Council has recently appointed the Inspector of Nuisances (Mr. Hy. Gibson) to carry out the Inspection of the District required by the Local Government Board under the Housing of the Working Classes Act. He has completed the Inspection of 52 houses. It would, however, be inexpedient to make any statement on the conditions revealed by his Inspection until by extension to the remainder of the

Township it makes possible a more general survey. Having merely stated, therefore, that a commencement has been made, I propose to lay before you at a later date a detailed analysis of the results, together with an account of any action which I may advise your Council to take in the matter.

The Water Supply of the District is obtained by arrangement with the Bolton Authorities from their mains, and comes from the Rivington Water Shed. The supply during the past year has been sufficient and wholesome, and the defective pressure formerly obtaining in parts of the Township seems to have been completely remedied since the re-boring of the mains.

The Milk consumed in the District comes chiefly from local farms; a small proportion is imported from Cheshire. The quality of the milk is, generally speaking, good, and the condition of Dairies and Cowsheds continues slowly to improve. I am not aware that any arrangement has been made for the inspection of Dairy Cows by Veterinary Surgeons with a view to detecting and eliminating those infected with Tuberculosis.

There is only one Slaughter-house in the District, which is visited by your Sanitary Inspector at the times of slaughtering. He has not, however, a special Certificate in Meat Inspection. No carcases have been condemned.

The drainage of the district is good, and sewage is discharged into the mains of the Wigan Corporation. Excreta are disposed of mainly by the privy-midden system, with a small proportion of Pail and Water Closets. This, as I have pointed out in previous Reports, constitutes one of the main defects of the Sanitary Administration of the District. It is a system which is universally condemned as militating against the health of the community, as acting as a source of infection, and as engendering the breeding of flies by which infection is conveyed to utensils and articles of food in the neighbouring houses. The doors of the middens are frequently defective, and in the process of emptying the contents have in some instances to be

carried or wheeled many yards to where the collecting-cart is in waiting. I would again suggest that your Council might make an effort to secure a certain number of conversions to water carriage, or pail closets during each year, and that it would be wise to prohibit the embodying of the Privy-Midden system in the plans of any new property erected.

No offensive Trades have been carried on during the year, and it has not been found necessary to condemn any articles of food exposed for sale.

The Roads of the district have been still further improved by the paving of Mill Lane and Crawford Street. The lighting of Wigan Road has also been improved by the substitution of incandescent burners in the street lamps.

Periodical Inspections of the District have been made by myself and the Sanitary Inspector (Mr. Gibson). The Inspector's Report on his work for the year will be found appended hereto.

PART II. VITAL STATISTICS FOR 1910.

Birth-rate.—Births registered during the year numbered 268 (152 Males and 116 Females). This gives a Birth-rate for the year of 31.74 per 1000 of population, a rate which is lower than that for any of the preceding 10 years, with the exception of 1907, when it fell to 28.7 per 1000. It is 3.56 per 1000 below the average rate for the past 10 years, and 4.29 per 1000 below the rate for 1909. Compared, however, with the general Birth-rate for the whole country (24.8 per 1000), as shewn by the Registrar-General's Returns, the rate is relatively favourable, and illustrates the fact that the Birth-rate in a colliery district is as a rule comparatively high.

Death-rate.—During the year 103 deaths of residents have occurred; of these, 61 were Males and 42 Females. Five out of the total occurred in Public Institutions outside the District. The Death-rate for the year is therefore 12.29 per 1000 living. This is a reduction of 5.84 per 1000 from the rate for last year, and of 6.4 per 1000 from the average rate of the last 10 years.

The year 1906 shows the nearest approach to the favourable figures for the present year, but even then the death-rate did not fall below 15.8 per 1000. The Rate for the whole country as given by the Registrar-General is 13.4 per 1000, so that the Aspull figures may be considered as being exceptionally good.

Infantile Mortality.—The number of Infants dying under 1 year of age was 37. The corresponding rate therefore is 138.05 per 1000 births. This is 24.15 per 1000 below the rate for last year, and 23.45 per 1000 below the average rate for the past 10 years. The Rate for the whole country is 106 per 1000 births. Of these 37 deaths, 15 or 40 per cent. of the total—occurred under the age of 1 month, and were certified as being due to Premature Birth, Congenital Defects, and Atrophy or Marasmus,—the greatest number being assigned to the first-named cause, which accounted for 8 deaths. This is doubtless due to the fact that expectant mothers are—as a result of defective knowledge,—not so careful of their health as they might be; their diet is in many cases unsuitable, they are often obliged to continue their domestic duties up to the last moment; many who are wage-earners remain at their occupation for an excessive period, and finally when the infant is born its reserve of vitality is so small, and its environment and treatment so unsuitable that it succumbs. Much could be done to remedy this waste of infant life by means of suitable instruction imparted to the mothers, and I would again put forward the suggestion contained in my last Annual Report, viz.,—that your Council should provide a supply of leaflets dealing with the subject, and that these should be distributed through the district. Such leaflets may now be obtained quite cheaply from several publishing firms, and if your Council will authorize me I will obtain a selection of these, and advise as to the most suitable for the conditions prevailing in this neighbourhood. In view of the falling Birth-rate it is important that all children born should be conserved in as healthy a state as possible, and a further step in this direction would be the adoption of the Notification of Births Act, and the appointment of a Health Visitor to assist in the instruction of the mothers.

Zymotic Disease.—Turning now to the Zymotic Disease present during the year, I am pleased to report that in this respect the experience of the township has been most fortunate. No epidemic has occurred, and it has not been necessary to close any schools for the purpose of checking Infectious Disease. Only 45 cases have been notified, as against 76 last year. This striking reduction has been mainly due to the comparative rarity of Scarlet Fever. Of this disease,—frequently so prevalent,—only 6 cases have occurred, as compared with 38 last year. It is well known that the incidence of Scarlet Fever in a particular neighbourhood varies within wide limits from year to year. For instance, in 1905 21 cases were notified. In 1906 the number rose to 107, and in 1907 and 1908 it fell again to 46 and 22 respectively. Such a year as 1910, however, with an incidence of only 6 cases among a population of nearly nine thousand, is of course very exceptional. For purposes of comparison it would be interesting to know the extent to which the disease has prevailed in surrounding districts during the same period. In this connection I may perhaps point out that the Local Government Board has from the beginning of 1911, inaugurated a system of Weekly Returns of all cases of Infectious Disease from each Medical Officer of Health throughout the country. On receipt of these at headquarters a weekly summary is prepared and forwarded to each Medical Officer of Health, with the result that there is placed at his disposal a knowledge of the prevalence of the various Infectious Diseases throughout the country, and—what is of greater interest,—the conditions obtaining in surrounding districts, and the occurrence there of any epidemic likely to invade his own district.

Diphtheria and Membranous Croup.—Two cases of the first-named disease were reported, of which one proved fatal. Of Membranous Croup there were no cases. This again is a very satisfactory condition of affairs as compared with 1909, when there were notified 6 cases of Diphtheria and 9 cases of Membranous Croup.

Enteric Fever.—This was the most prevalent Infectious Disease of the year,—19 cases, with 2 deaths.

The months when it was most prevalent were:—

February	...	...	...	4 cases.
August	...	...	...	3 cases.
May, June, Sept., Oct.		...	...	2 cases in each.

The distribution as regards locality was as follows: —

Harold Street	...	6 cases (3 in same house)
Wigan Road	...	3 cases
Fairbrother's Yd.	...	3 cases (all in same house)
Vigo Street	...	2 cases (all in same house)
Heaton Street	...	2 cases (all in same house)
Longfield Street	...	
Cale Lane	...	1 case each
Simm's Squaro	...	

Of the six cases in Harold Street,—the first was a lad living at No. 20, and was notified on May 13th. The second case,—a sister of case No. 1, and evidently infected about the same time,—was notified on May 24th. A third child in the same family subsequently developed the disease, and was notified on July 28th. The fourth case was notified on October 4th from No. 3, Harold Street. This is a back-to-back house, but not in the same yard as No. 20. Case No. 5 was notified from No. 6, Harold Street ten days later, and the last case of the series was notified from No. 28 early in December. An investigation of these six cases revealed no common source of infection. The milk supply was not the same in the various houses. The only point in common to them all was the presence of unpaved yards and privy-middens. This I think affords another cogent argument in favour of my previous suggestions with regard to the conversion of privy middens. Professor Osler says, “Fingers, Food, and Flies, are the chief means of local contagion.” In the Spanish-American War of 1898 “flies were undoubtedly the most active agents in the spread of typhoid fever.” It has also been shown that Typhoid Bacilli may live in the upper layers

of the soil for eleven months. The conditions, therefore, in houses such as those in Harold Street are most favourable for the spread of Enteric Fever. The first step is that Bacilli from a Typhoid patient escape destruction by the disinfectant used. These are propagated in the neighbouring Privy-midden, and the flies which always swarm in these places during the warmer months, convey the contagion to other houses. Moreover, the soil of the unpaved yard is liable to contamination during the process of cleansing and emptying the midden.

The three cases in Fairbrother's Yard were all children of the one family, and were all notified within a day or two of each other. The two in Heaton Street were mother and child, both infected about the same time. The two in Vigo Street also occurred in the same house, but whereas one occurred in March, the other was not reported till August 16th. Finally, the 3 cases in Wigan Road occurred in August and September, and had no definite relationship to each other.

Ophthalmia Neonatorum.—In accordance with the recommendation of the Local Government Board, your Council, in the early part of the year, added this disease to the list of those compulsorily notifiable, and as a result 3 cases were reported. I have no doubt that your action in this matter was a step in the right direction, as the greater part of so-called Congenital Blindness is due to the ravages of this disease in newly-born infants, and much depends on its early and prompt recognition and treatment. As the populace,—and more especially the midwives,—become alive to the fact that it has been made notifiable, medical help will be sought earlier, and cases will cease to be neglected or made light of as they have been in the past.

Erysipelas and Puerperal Fever.—Fourteen cases of the former disease and one of the latter completed the list of notifications for 1910.

Non-notifiable Infectious Disease. Measles and Whooping Cough have been practically absent during the whole year, and no death has been attributed to them.

Deaths from Infectious Disease.—These were as follows:

Diphtheria	...	...	1
Enteric Fever	...	...	2
Diarrhoea	...	...	7

The Zymotic Death-rate for the year was 1.190 per 1000 of population,—a decrease of 1.015 per 1000 from the rate for last year. The Rate for the whole country during the same period was .99 per 1000.

Deaths from General Diseases.—Among these it may be mentioned that Tubercular Diseases were credited with 7 deaths, and this corresponds to a Tubercular Death-rate of .835 per 1000. Five out of the seven were due to Pulmonary Tuberculosis.

Respiratory Diseases accounted for 23 deaths, giving a Respiratory Death-rate of 2.743 per 1000.

Cancer was responsible for 3 deaths.

There was one case of Suicide and one Fatal Accident during the year.

In conclusion I beg to direct your attention to the usual accompanying Tables, giving various details of the Vital Statistics for the year.

Table I. gives details of the Births and Deaths in the separate Wards for each month.

Table II. shows the number of Infectious cases reported month by month.

Table III. enumerates the different diseases which contributed to the Zymotic Death-rate for the year.

Table IV. contrasts the Zymotic, Pulmonary and Tubercular Death-rates, and also shows the Rates for these diseases per 1000 deaths.

Table V. has been introduced in order that your Council may have in tabular form particulars of the Birth-, Death-, and Infantile Mortality-Rate for Aspull, and also for the whole of England and Wales.

The Sanitary Officer (Mr. Hy. Gibson), reports as follows:

Defective Drains	43	Abated	43
Do. Gullies	19	do.	19
Do. Privies	12	do.	12
Do. Waste Pipes	16	do.	16
Houses Fumigated	...	...	19
Do. Cleaned and Limewashed		...	25
Do. Overcrowded	...	...	14
Do. Inspected	...	...	52
Number of Privies in District	...	...	923
Do. Water Closets	...	...	86
Do. Pail Closets	...	...	29
Do. Privies emptied	...	...	3240
Do. Pails emptied	...	...	1137
Do. Ashpits emptied	...	...	2078

We have very few notices to serve with regard to defective drains and gullies, as we have practically a general order from property-owners to attend to such nuisances at once.

Hy. GIBSON, Sanitary Inspector.

I am Gentlemen,

Your obedient Servant,

L. COOKE,

Medical Officer of Health.

COUNTY OF LANCASTER.

SUMMARY OF MEDICAL OFFICER'S REPORT FOR 1910.

Urban District of Aspull.

Area in Statute Acres, 1905. Population (Census) 1901, 8380; (Estimated) 1910, 8380.

Name of Medical Officer of Health, L. Cooke. Salary, £35.

Births registered: Males 152, Females 116; Total 268.

Deaths registered: Males 61, Females 42; Total 103.

Number of Illegitimate Births registered, 5. Deaths of Illegitimates under one year of age, 3.

Birth-rate, 31.74. Death-rate, 12.29. Rate of Infant Deaths, under 1 year, to 1,000 Births, 138.0

Death-rate from the Seven Principal Epidemic Diseases per 1,000 of population, 1.190.

Diseases specially prevalent? Enteric Fever. Period? Summer and Autumn.

Any Schools Closed? No.

What is the character of the Hospital Accommodation? For Small-pox, good. For other Infectious Diseases, Wigan Sanatorium.

Is it Joint or otherwise? £2 2s. per week per case. No retaining fee.

Number of Beds available for your District? For Small-pox — For other Infectious Diseases, 50.

No. of cases removed to hospital from your District? Enteric Fever 7; Total 7.

Deaths in Hospital of patients from your District? From what causes? 2.

How is disinfection carried out? Houses, Fumigation.

No. of Houses disinfected? 19. Apparatus used for Clothing, Bedding, &c. (steam or otherwise)? —

If apparatus at a Hospital is available is it used for the disinfection of Clothing, Bedding, &c. of Patients not removed to the Hospital? Yes.

Where is apparatus situated? Wigan Sanatorium.

Number of cases of Infectious Disease reported under the Notification Act? 45. Are any Diseases not specifically mentioned in the Act notifiable (for instance Measles, Whooping Cough, Dlarrhoea, Chicken Pox, Ophthalmia Neonatorum, &c.)? Is so, what are they? Ophthalmia Neonatorum.

Bacteriological Examinations. No. and nature of specimens examined? None.

Has any arrangement been made for the "voluntary" notification of Pulmonary Tuberculosis? No.

No. of cases of Pulmonary Tuberculosis reported under the Public Health (Tuberculosis) Regulations, 1908? 1.

Has any arrangement been made under the Diphtheria Anti-toxin Order, 1910? Yes. Supply kept at Council Offices.

Action taken under "The No. of Dwelling-houses in Housing of the Working classes, 1890 to 1909." spected? 52.

From where is the Water Supply obtained? What is its condition? Bolton. Rivington Watershed. Good.

Is it subject to your inspection? Yes.

Is Scavenging and Removal of House Refuse carried out satisfactorily? Yes.

How performed—By Sanitary Authority, Contract, or Occupiers of Houses? By contract.

How is the refuse disposed of? Deposited on Farm land.

Has a Destructor been provided? No.

Sewage Disposal Works. Method of treatment?	Taken by mains of Wigan Corporation.
What is the character of the Drainage System?	Good.
Drain Testing, Flushing, &c.?	Periodical flushing.
Action taken with regard to the Pollution of Streams?	None.
What is the condition of the Bakehouses?	Good.
,, Slaughter Houses?	Good. Has a Public Abattoir been provided? No.
,, Lodging Houses?	None.
What is the sanitary condition of the Schools?	Satisfactory.
Dairies, Cowsheds, and Milk-shops—Are they periodically inspected?	Yes. What is their condition? Improving.
Have Regulations been made under the order of the L.G.B.?	Yes.
Amount of air space in cubic feet required for each cow?	
No. of Cowkeepers?	21.
No. of Dairymen or Purveyors of Milk (other than Cowkeepers)?	None.
Food unfit for Human Consumption: Amount seized?	None.
Department of Inspector of Nuisances	No. of Notices served? 90. Nuisances remedied? 90. No. of Legal Proceedings taken and result? None.
Closet accommodation of the District	No. of Privy Middens? 923. Pail Closets? 29. Fresh Water Closets? 71. Waste Water Closets? 15. No. of Privy Middens converted during 1910? To W.C.'s, 9. To Pails, &c., 3.
Smoke: No. of Observations?	None taken.
Has a Health Visitor been appointed?	No.

TABLE I.
SHEWING BIRTHS AND DEATHS FOR
BIRTHS.

	BIRTHS.						DEATHS.						IN EACH MONTH OF 1910.												
	North Ward			East Ward			New Springs Ward			Whole Township			North Ward			East Ward			New Springs Ward			Whole Township			
	To-tal	M	F	To-tal	M	F	To-tal	M	F	To-tal	M	F	To-tal	M	F	To-tal	M	F	To-tal	M	F	To-tal	M	F	
Jan.	6	3	9	4	3	7	4	4	8	14	10	24	2	1	3	2	3	5	1	2	3	5	6	11	
Feb.	5	...	5	3	2	5	8	8	16	16	10	26	...	1	1	1	1	2	3	1	4	4	3	7	
Mar.	5	6	11	2	6	8	5	6	11	12	18	30	...	...	...	1	6	7	2	1	3	3	7	10
April	10	1	11	4	5	9	4	1	5	18	7	25	...	...	...	2	...	2	...	1	1	2	1	3
May	2	2	4	...	2	2	5	6	11	7	10	17	1	1	2	...	3	3	2	1	3	3	5	8	
June	4	2	6	4	2	6	8	7	15	16	11	27	1	...	1	2	1	3	4	2	2	6	7	3	10
July	6	4	10	4	1	5	9	2	11	19	7	26	1	1	2	1	1	2	4	2	2	6	6	4	10
Aug.	1	1	2	2	2	4	3	2	5	6	5	11	1	1	2	...	...	...	2	...	2	...	2	3
Sept.	3	3	6	3	...	3	5	3	8	11	6	17	2	2	4	2	...	2	2	2	...	4	6	4	10
Oct.	2	1	3	2	2	4	4	5	9	8	8	16	1	1	2	1	...	1	6	...	6	8	1	9	
Nov.	4	5	9	1	4	5	7	5	12	12	14	26	2	1	3	1	2	3	...	2	2	3	5	8	
Dec.	3	1	4	4	3	7	6	6	12	13	10	23	2	2	...	...	...	...	6	...	6	8	...	8
Totals	51	29	80	33	32	65	68	55	123	152	116	268	13	9	22	13	17	30	32	14	46	58	40	98	
Deaths of Residents occurring beyond District...																						3	2	5	
Total Deaths for whole District...																						61	42	103	

TABLE II.

SHEWING MONTHLY INCIDENCE OF INFECTIOUS DISEASE.

	Erysipelas	Diphtheria	Scarlet Fever	Enteric Fever	Puerperal Fever	Ophthalmia Neonatorum	Total
January	2	1	...	1	...	...	4
February .....	...	...	1	4	...	...	5
March .....	...	...	2	1	...	...	3
April .....	...	...	...	...	...	...	...
May	1	...	...	2	...	2	5
June	3	...	...	2	...	...	5
July	2	...	2	1	1	1	7
August	1	...	...	3	...	...	4
September .....	...	...	...	2	...	...	2
October	3	...	...	2	...	...	5
November	1	...	1	...	...	...	2
December	1	1	...	1	...	...	3
Total	14	2	6	19	1	3	45

TABLE III.

SHOWING ZYMIC DEATH RATE.

	No. of Cases		Rate per 1000
Diphtheria	1	...	.119
Enteric	2	...	.238
Diarrhoea	7	...	.883
Totals	10	...	1.190

TABLE IV.

SHOWING ZYMIC, TUBERCULAR, AND
PULMONARY DEATH RATES.

Disease	No. of Cases	Rate per 1000 living	Rate per 1000 deaths
Zymotic.....	10	1.190	97.08
Pulmonary ...	23	2.743	223.30
Tubercular ...	7	.835	67.96
Total ...	40	4.768	388.34

TABLE V.
SHOWING COMPARISONS OF VARIOUS VITAL STATISTICS.

Average of past 10 years.	Birth Rate.	Death Rate.	England and Wales			England and Wales			England and Wales		
			1909.	1910.	10 years.	1909.	1910.	10 years.	1909.	1910.	1910.
35.3	36.03	31.74	24.8	18.6	18.13	12.29	13.4	161.5	162.2	138.0	106

TABLE VI.
VITAL STATISTICS OF WHOLE DISTRICT DURING 1910 AND PREVIOUS YEARS.
DISTRICT OF ASPULL.

YEAR	Population estimated to middle of each Year	BIRTHS		TOTAL DEATHS REGISTERED IN THE DISTRICT		Deaths in Public Institutions in the District	Deaths of Non-residents registered in Public Institutions in the District	Deaths of Residents registered in Public Institutions beyond the District	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT				
		Number	Rate*	Number	Rate* per 1000 registered					Number	Rate*		
1	2	3	4	5	6	7	8	9	10	11	12	13	
1900	9000	309	34.3	57	184.1	172	19.2	...	...	...	173	19.2
1901	8380	310	36.9	47	151.6	187	22.3	...	...	7	187	22.3
1902	"	308	35.5	47	152.5	166	19.3	...	...	4	166	19.3
1903	"	316	37.7	58	183.5	178	21.3	...	...	10	178	21.3
1904	"	327	39.0	49	149.8	151	18.0	...	...	10	151	18.0
1905	"	291	34.6	61	209.6	154	18.3	...	...	3	154	18.3
1906	"	292	34.8	33	113.0	125	14.9	...	...	8	133	15.8
1907	"	241	28.7	39	161.8	133	15.8	...	...	4	137	16.3
1908	"	298	35.5	41	137.5	135	16.1	...	...	12	147	17.5
1909	"	302	36.03	49	162.2	141	16.8	...	...	11	152	18.13
Averages for years 1900-1909		8690	299	35.3	48	161.5	154	18.2	7	157	18.6
1910	8380	268	31.74	37	138.05	98	11.69	...	...	5	103	12.29

* Rate in Columns 4, 8, and 13 calculated per 1000 of estimated population.

Area of District in acres (exclusive of area covered by water) - 1905.

Total population at all ages 8380 }
 Number of inhabited houses 1616 } At Census
 Average number of persons per house 5 } of 1901.

I	II	III.
Institutions within the District receiving sick and infirm persons from outside the District.	Institutions outside the District receiving sick and infirm persons from the District.	Other institutions, the deaths in which have been distributed among the several localities in the District.
Nil	Wigan Infirmary Wigan Sanatorium for Infectious Disease	Nil
		Is the Union Workhouse within the District? No.

TABLE VII.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1910.
 DISTRICT OF ASPULI.

Notifiable Disease.	Cases notified in whole District.					Total cases removed to Hospital.
	At all Ages.	Under 1.	1 to 5.	5 to 15.	15 to 25.	
Diphtheria (including Membranous croup)	2	...	1	1	...	...
Erysipelas	14	1	...	...	3	10
Scarlet Fever	6	...	1	1	3	1
Enteric Fever	19		1	6	5	7
Puerperal Fever	1	...	...	...	1	...
Ophthalmia Neonatorum	3	3	...	...	...	...
Totals . . .	45	4	3	8	11	19
						7

Isolation Hospital—Name and Situation : Wigan Sanatorium.

Total available beds : 50.

Number of Diseases that can be concurrently treated : 4.

TABLE VIII. CAUSES OF, AND AGES AT, DEATH DURING YEAR 1909.

	DISTRICT OF ASPULL.					25 and under 65	65 and upwards.
	All Ages	Under 1 year	1 and under 5	5 and under 15	15 and under 25	...	...
Diphtheria (including Membranous Group)	1	...	1	1	...	1	...
Fever—Enteric	2	5	1	...	...	1	1
Diarrhoea...	7	2	1	...	...	...	2
Enteritis	5	1	...	...	...	...	...
Erysipelas	1	1	...	1	...	...	...
Phthisis (Pulmonary Tuberculosis) ...	5	1	1	...	4	4	...
Other Tuberculous diseases	2	...	...	...	...	...	...
Cancer, malignant disease	3	1	...	...	2	2	...
Bronchitis	6	5	7	1	1	5	5
Pneumonia	16	...	...	...	1	2	...
Other Diseases of Respiratory Organs	1	8	...	...	1	...	...
Premature Birth ...	8	...	...	...	...	...	...
Diseases & Accidents of Parturition	2	...	...	...	1	1	...
Heart Diseases	2	1	...	...	1	1	1
Accidents	1	1	...	...	...	...	...
Suicides	1	1	5	13	1	12	9
All other causes	40	...	...	...	...	...	...
All causes...	103	37	15	3	4	25	19

TABLE IX.

INFANTILE MORTALITY DURING THE YEAR 1910.

Deaths from stated Causes in Weeks and Months under One Year of Age.

Cause of Death.	All Causes, Certified.....	12	1	1	15	1	2	...	3	3	4	2	37
Diarrhoea, all forms.....	...	...	...	...	...	...	...	1	1	1	1	1	5
Enteritis, Muco-enteritis, Gastro-enteritis	7	...	...	1	8	...	...	1	...	...	1	...	2
Premature Birth	2	...	1	1	2	...	1	...	1	...	1	...	8
Congenital Defects	2	...	1	1	4	...	1	...	1	...	1	...	2
Atrophy, Debility, Marasmus.....	2	...	1	1	...	...	...	...	...	...	1	...	7
Tuberculous Peritonitis:													
Tabes Mesenterica	...	...	...	...	...	...	...	1	...	...	1	...	1
Erysipelas .....	...	...	...	...	...	...	...	1	...	...	1	...	1
Meningitis	1	...	...	...	1	...	...	...	...	...	1	1	2
Convulsions .....	...	...	...	...	...	...	...	...	...	...	1	...	1
Bronchitis .....	...	...	...	...	...	...	...	...	2	...	1	...	5
Pneumonia.....	...	...	...	...	...	...	...	1	...	...	1	1	1
Suffocation, overlying .....	...	...	...	...	...	...	1	...	...	...	...	...	1
Other Causes.....	...	...	...	...	...	...	...	...	...	...	...	...	1
Totals	12	1	1	15	1	2	...	3	3	1	1	2	37

under 1 year

Total Deaths

Population (estimated to middle of 1910), 8380.

Births in the year: Legitimate 263, Illegitimate 5.

Deaths in the year of: Legitimate Infants, 34 ; Illegitimate Infants, 3.

Deaths from all Causes at all Ages, 103.
